



# TOWN OF LOS GATOS

## PARKS COMMISSION APPLICATION

Submit to: Office of the Town Clerk  
110 East Main Street, P.O. Box 949, Los Gatos, CA 95031  
Telephone: (408) 354-6834 • Fax: (408) 354-8431 • Email: [clerk@losgatosca.gov](mailto:clerk@losgatosca.gov)

**Please type or print legibly**

* Last Name: _____	* First Name: _____
* Address: _____	* City: _____ * Zip: _____
* Home Phone: _____	Work Phone: _____
Email: _____	Fax: _____
Present Employer: _____	Job Title: _____
Length of Residency in Los Gatos: _____	
* If appointed, this information will be made available to the public.	

Previously Held Elected or Appointed Governmental Positions	Position/Office Held	Dates
Civic or Charitable Organizations You Have Belonged To	Position/Office Held	Dates
Schools Attended/Attending	Major Subject and/or Grade Level	
A separate application is required for each Commission. Please list other Commissions you are applying to: _____		

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please check the appropriate category:

- ☐ I am applying as a resident of the Town of Los Gatos.
- ☐ I am applying as a resident of the City of Monte Sereno.
- ☐ I am applying for a student commissioner position.

1. What do you know about the Parks Commission? \_\_\_\_\_

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2. How many meetings of the Commission have you attended? \_\_\_\_\_

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3. Why do you want to be a member of the Commission? \_\_\_\_\_

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4. If appointed:

What would you like to accomplish during the first year as a member of the Commission?

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What would you like to accomplish during your four year term as a member of the Commission?

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How would you contribute as a Commission member to achieving these accomplishments as well as additional Commission projects? \_\_\_\_\_

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